

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines American Maritime Officers Voluntary Political Action Fund

ADDRESS (number and street) 2 West Dixie Highway Dania Beach FL 33004

2. FEC IDENTIFICATION NUMBER C00027532 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2006 through 04 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer EDWARD KELLY

Signature of Treasurer Electronically Filed by EDWARD KELLY Date 09 19 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		94489.41
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	124940.15									
(c) Total Receipts (from Line 19)	41902.75	234470.36								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	166842.90	328959.77								
7. Total Disbursements (from Line 31)	52828.26	214945.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	114014.64	114014.64								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	20432.00	104605.00
(i) Itemized (use Schedule A)	21470.75	128364.75
(ii) Unitemized	41902.75	232969.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	41902.75	232969.75
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	1500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.61
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	41902.75	234470.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	41902.75	234470.36

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	211000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1057.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	1057.00
29. Other Disbursements.....	2828.26	2888.13
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	52828.26	214945.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	52828.26	214945.13

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	41902.75	232969.75
34. Total Contribution Refunds (from Line 28(d))	0.00	1057.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41902.75	231912.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	-1500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
MICHAEL ACTON

Mailing Address P O BOX 166

City State Zip Code
SIASCONSET MA 02564

FEC ID number of contributing federal political committee. **C**

Name of Employer INTEROCEAN UGLAND MGMT CO- RP.
Occupation SECOND MATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.37738

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
JOSE AGUILAR

Mailing Address 2552 BIRON ST.

City State Zip Code
MANDEVILLE LA 70448

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN OVERSEAS MARINE
Occupation 3rd Asst Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.37842

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
PERY AHLUWALIA

Mailing Address P.O. BOX 227

City State Zip Code
HONOLULU HI 96810

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN OVERSEAS MARINE
Occupation 3rd Asst Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37936

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
ERIC ANDERSEN

Mailing Address 10 MacIntosh Rd

City State Zip Code
Norwalk CT 06851

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTEROCEAN UGLAND MGMT. 1st Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2006

Transaction ID: SA11A1.37878

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
RICARDO ARAIZA

Mailing Address 406 E MONROE AVE

City State Zip Code
ORANGE CA 92667

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DYN MARINE SERVICES SECOND MATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2006

Transaction ID: SA11A1.37991

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
OLIVER BABAJKO

Mailing Address 1617 FLORINDA DR

City State Zip Code
ORLANDO FL 32804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Various Shipping Companies Merchant Marine Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2006

Transaction ID: SA11A1.37853

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional)	▶	920.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. LEO BOUDREAU		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address NOVA SCOTIA PO BOX 47 ARICHAT		Transaction ID: SA11A1.37802	
City State Zip Code CANADA BOE 1AD ZZ		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer MAERSK LINE LTD.		Occupation MASTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. DAVID BOULANGER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 260 KAUFMAN RD		Transaction ID: SA11A1.37922	
City State Zip Code SOMERSET MA 02726		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer VARIOUS SHIPPING COMPANIES		Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. DONALD BRIDENSTINE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address 3230 EAST FLAMINGO RD. #559		Transaction ID: SA11A1.37823	
City State Zip Code LAS VEGAS NV 89121		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer PRONAV SHIP MANAGEMENT		Occupation 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. JAMES BROWN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address 51 MORRISON RD		Transaction ID: SA11A1.37790
City State Zip Code SPRINGVALE ME 04083	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
Name of Employer Occupation OSPREY SHIP MGMT, INC. Chief Engineer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

Full Name (Last, First, Middle Initial) B. BART CLENDENIN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 7 / 2 0 0 6
Mailing Address 111 FARRAGUT DR.		Transaction ID: SA11A1.37727
City State Zip Code PALM COAST FL 32137	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00
Name of Employer Occupation INTEROCEAN AMERICAN SHIPP- ING CORP 3rd Mate	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

Full Name (Last, First, Middle Initial) C. JOSHUA COLFER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address RR6 BOX 1122		Transaction ID: SA11A1.37793
City State Zip Code AUGUSTA ME 04330	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00
Name of Employer Occupation MAERSK LINE LTD 2nd Asst Engineer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
DAVID DECROW

Mailing Address P O BOX 292

City State Zip Code
BLUE HILL ME 04614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PACIFIC GULF MARINE, INC. CHIEF ENGINEER DIESEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 21 / 2006

Transaction ID: SA11A1.37865

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
RENO DEROSIER

Mailing Address 10 UNION STREET

City State Zip Code
GREENFIELD MA 01301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Various Shipping Companies Merchant Marine Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 13 / 2006

Transaction ID: SA11A1.37787

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
CRAIG DETLEFSEN

Mailing Address 1901 N WESTWOOD BLVD
STE 1

City State Zip Code
POPLAR BUFF MO 63901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VARIOUS SHIPPING COMPANIES MERCHANT MARINE OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 07 / 2006

Transaction ID: SA11A1.37767

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
BRADFORD DILLMAN

Mailing Address 1400 SW 70TH AVE

City State Zip Code
PLANTATION FL 33317

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 07 / 2006

Transaction ID: SA11A1.37766

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY DOHERTY

Mailing Address 234 SCOOTER DR.

City State Zip Code
PANAMA CITY BCH. FL 32408

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2006

Transaction ID: SA11A1.37920

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
DAVID ELDRIDGE

Mailing Address 8312 SPRING BREEZE CT.

City State Zip Code
ELLICOTT CITY MD 21043

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2006

Transaction ID: SA11A1.37871

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
WILLIAM GAMAGE

Mailing Address 220 CUMBERLAND RD

City N YARMOUTH State ME Zip Code 04097

FEC ID number of contributing federal political committee. **C**

Name of Employer VARIOUS SHIPPING COMPANIES Occupation MERCHANT MARINE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.37789

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
HARRY GEARHART

Mailing Address P.O. BOX 507

City FLORENCE State MT Zip Code 59833

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.37761

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CONSTANTINO GOULAS

Mailing Address 131 PALM TRACE LANDINGS DRIVE

City Davie State FL Zip Code 33314

FEC ID number of contributing federal political committee. **C**

Name of Employer TRANSOCEANIC CABLE SHIP Occupation 3rd Mate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.37886

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. JOHN HADLEY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6
Mailing Address 11562 HALETHORPE DR		Transaction ID: SA11A1.37852
City JACKSONVILLE	State FL	Zip Code 32223
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. ANDREW HAYDEN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address 84 HAMPTON TOWNE ESTATE		Transaction ID: SA11A1.37875
City HAMPTON	State NH	Zip Code 03842
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer OCEAN SHIPS INC	Occupation CHIEF ENGINEER DIESEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. LAWRENCE HEARN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 6
Mailing Address 3389 SHERIDAN ST SUITE #196		Transaction ID: SA11A1.37863
City HOLLYWOOD	State FL	Zip Code 33021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer TRANSOCEANIC CABLE SHIP CO.	Occupation 2ND ENGINEER STEAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. LAWRENCE HEARN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 3389 SHERIDAN ST SUITE #196		Transaction ID: SA11A1.37912	
City State Zip Code HOLLYWOOD FL 33021		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation TRANSOCEANIC CABLE SHIP CO. 2ND ENGINEER STEAM			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) B. MARC HEYRMAN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address P.O. BOX 731987		Transaction ID: SA11A1.37967	
City State Zip Code PUYALLUP WA 98373		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CROWLEY LINER SERVICES Chief Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. WAYNE KEINANEN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address		Transaction ID: SA11A1.37856	
City State Zip Code		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
WAYNE KEINANEN

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.37858

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
JOHN KNAUSS

Mailing Address P.O. BOX 193

City State Zip Code
SPENCERTOWN NY 12156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRANSOCEANIC CABLE SHIP 1st Mate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.37883

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DAVID LIIMATTA

Mailing Address 4810 RED JACKET
SHAFT

City State Zip Code
CALUMET MI 49913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Various Shipping Companies Merchant Marine Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37972

Amount of Each Receipt this Period
117.00

SUBTOTAL of Receipts This Page (optional) ► **817.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
CURTIS LOFTFIELD

Mailing Address 24628 PIONEER WAY NW

City State Zip Code
POULSBO WA 98370

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 13 / 2006

Transaction ID: SA11A1.37794

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
DANIEL LUNNY

Mailing Address 346 C J CUSHING HWY

City State Zip Code
SCITUATE MA 02066

FEC ID number of contributing federal political committee. **C**

Name of Employer INTEROCEAN UGLAND MGMT. Occupation Chief Mate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2006

Transaction ID: SA11A1.37874

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
GLEN MACARIO

Mailing Address 2966 SW BRIGHTON WAY

City State Zip Code
PALM CITY FL 34990

FEC ID number of contributing federal political committee. **C**

Name of Employer INTEROCEAN UGLAND MGMT CO-RP. Occupation CHIEF OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 28 / 2006

Transaction ID: SA11A1.37946

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 1200.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
GLEN MACARIO

Mailing Address 2966 SW BRIGHTON WAY

City State Zip Code
PALM CITY FL 34990

FEC ID number of contributing federal political committee. **C**

Name of Employer INTEROCEAN UGLAND MGMT CO- RP.
Occupation CHIEF OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37948

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
THOMAS MADDEN

Mailing Address 15 DOUGLAS DR

City State Zip Code
N EASTON MA 02356

FEC ID number of contributing federal political committee. **C**

Name of Employer VARIOUS SHIPPING COMPANIES
Occupation MERCHANT MARINE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37923

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RHETT MANN

Mailing Address 2454 CUMBERLAND DR

City State Zip Code
REDDING CA 96001

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies
Occupation Merchant Marine Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37992

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
GREGORY MAXWELL

Mailing Address 20 Edwards Street

City State Zip Code
South Portland ME 04106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USS TRANSPORT, LLC Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
04 / 07 / 2006

Transaction ID: SA11A1.37729

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY MC GEEIN

Mailing Address 1808 DUKE OF YORK QUAY

City State Zip Code
VIRGINIA BCH VA 23454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTEROCEAN UGLAND MGMT. Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2006

Transaction ID: SA11A1.37826

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
TIMOTHY MC GEEIN

Mailing Address 1808 DUKE OF YORK QUAY

City State Zip Code
VIRGINIA BCH VA 23454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INTEROCEAN UGLAND MGMT. Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
04 / 28 / 2006

Transaction ID: SA11A1.37957

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	1200.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
ROBERT MULLARKY

Mailing Address 11712 C JEFFERSON AVE

City State Zip Code
NEWPORT NEWS VA 23606

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAERSK LINE LTD 2nd Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.37893

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
CRAIG NIEDZIELSKI

Mailing Address 13249 Liahona Avenue

City State Zip Code
Jacksonville FL 32225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Various Shipping Companies Merchant Marine Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.37901

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KEVIN O'DONNELL

Mailing Address 558 Reliance Avenue

City State Zip Code
HENDERSON NV 89015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAERSK LINE LTD 1st Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.37817

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
TIMOTHY PALANGE

Mailing Address 55410 DELTA RD

City State Zip Code
BLUE RIVER OR 97413

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37934

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
JAMES PARKER

Mailing Address 959 SHUNPIKE

City State Zip Code
CAPE MAY NJ 08204

FEC ID number of contributing federal political committee. **C**

Name of Employer INTEROCEAN UGLAND MGMT CO-RP Occupation MASTER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.37913

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
MATTHEW PATRIQUIN

Mailing Address 10 CLARISSA RD

City State Zip Code
CHELMSFORD MA 01824

FEC ID number of contributing federal political committee. **C**

Name of Employer VARIOUS SHIPPING COMPANIES Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 6

Transaction ID: SA11A1.37795

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
EDWARD PFAEFFLE

Mailing Address 1327 YHE HIDEOUT

City State Zip Code
LAKE ARIEL PA 18436

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OCEAN SHIPS INC MASTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37931

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
CHARLES PHELAN

Mailing Address 1007 SOUTHGATE DR.

City State Zip Code
ELIZABETHTON TN 37643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN OVERSEAS MARINE 2nd Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.37925

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
WILLIAM PIMM

Mailing Address 138 WYOMING AVE

City State Zip Code
UNION NJ 07083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MAERSK LINE LTD Chief Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 6

Transaction ID: SA11A1.37889

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. AARON PITRAGO		Date of Receipt MM / DD / YYYY 04 / 28 / 2006
Mailing Address 41 N. FLOWER		Transaction ID: SA11A1.37973
City CROSWELL	State MI	Zip Code 48422
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 71.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. FRANK PORCELLINI		Date of Receipt MM / DD / YYYY 04 / 13 / 2006
Mailing Address P O BOX 157		Transaction ID: SA11A1.37819
City MILMAY	State NJ	Zip Code 08340
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. DONALD REYNOLDS		Date of Receipt MM / DD / YYYY 04 / 13 / 2006
Mailing Address 22378 GEORGETOWN RD.		Transaction ID: SA11A1.37843
City LAWRENCEBURG	State IN	Zip Code 47025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer USS TRANSPORT, LLC	Occupation 2nd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	971.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 43
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. KEVIN ROGERS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address 1436 US 31		Transaction ID: SA11A1.37840	
City State Zip Code Kewadin MI 49648	Amount of Each Receipt this Period 141.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) B. DONALD RUMNEY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6	
Mailing Address 49 POND STREET BOX 1485		Transaction ID: SA11A1.37866	
City State Zip Code BUCKSPORT ME 04416	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. CHARLES SMITH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 1535 NAUCO ROAD		Transaction ID: SA11A1.37974	
City State Zip Code MOBILE AL 36605	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	641.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
DISCHMOND SPURRIER

Mailing Address 320 SHANGRI-LA LANE

City Wellsburg State WV Zip Code 26070

FEC ID number of contributing federal political committee. **C**

Name of Employer OCEAN SHIPS, INC. Occupation 1st Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
04 / 28 / 2006

Transaction ID: SA11A1.37961

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
DAVID TARRANT

Mailing Address 5410 PENZANCE CT.

City Katy State TX Zip Code 77449

FEC ID number of contributing federal political committee. **C**

Name of Employer MAERSK LINE LTD. Occupation RADIO ELECTRONIC OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
04 / 28 / 2006

Transaction ID: SA11A1.37981

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BRADLEY UPHAM

Mailing Address 12900 LAKE AVE. SUITE 1821

City Lakewood State OH Zip Code 44107

FEC ID number of contributing federal political committee. **C**

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
04 / 07 / 2006

Transaction ID: SA11A1.37759

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. GLENN WHEELER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 11614 N. CREEK DR.		Transaction ID: SA11A1.37980	
City State Zip Code CORPUS CHRISTI TX 78410		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer INTREPID PERS. & PROVISION-INC		Occupation 1ST ENGINEER DIESEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. JAMES WHITE JR		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6	
Mailing Address 215 SAND HILL COVE		Transaction ID: SA11A1.37927	
City State Zip Code NARRAGANSETT RI 02882		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer VARIOUS SHIPPING COMPANIES		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. TIMOTHY WILKINS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 6	
Mailing Address		Transaction ID: SA11A1.37829	
City State Zip Code		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 / 43	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

A. Full Name (Last, First, Middle Initial)
DENNIS ZEIGLER

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	0	6

Transaction ID: SA11A1.37969

Amount of Each Receipt this Period
83.00

SUBTOTAL of Receipts This Page (optional)	▶	83.00
TOTAL This Period (last page this line number only)	▶	20432.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. AMERIPAC		Transaction ID: SB23.37668 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 140 COVANT #2		Amount of Each Disbursement this Period 2500.00
City MANCHESTER State NH Zip Code 03102	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. BILBRAY, BRIAN P		Transaction ID: SB23.37664 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 2466 UNICORNIO STREET		Amount of Each Disbursement this Period 1000.00
City CARLSBAD State CA Zip Code 92009	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. BOB FILNER FOR CONGRESS		Transaction ID: SB23.37642 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 127868		Amount of Each Disbursement this Period 1000.00
City San Diego State CA Zip Code 92112	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. BOSWELL FOR CONGRESS		Transaction ID: SB23.37641 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO BOX 823		Amount of Each Disbursement this Period 1000.00
City INDIANOLA State IA Zip Code 50125	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. BRIAN BAIRD FOR CONGRESS		Transaction ID: SB23.37640 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO BOX 5016		Amount of Each Disbursement this Period 1000.00
City VANCOUVER State WA Zip Code 98668	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. CHAMBLISS FOR CONGRESS		Transaction ID: SB23.37603 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 6
Mailing Address P.O. BOX 4084		Amount of Each Disbursement this Period 2500.00
City MACON State GA Zip Code 31208	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. CHET EDWARDS FOR CONGRESS		Transaction ID: SB23.37639 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO BOX 23273		Amount of Each Disbursement this Period 1000.00
City WACO State TX Zip Code 76702	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. COBURN FOR SENATE COMMITTEE		Transaction ID: SB23.37604 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 6
Mailing Address 3300 N OKMULGEE ST PO BOX 977		Amount of Each Disbursement this Period 1000.00
City MUSKOGEE State OK Zip Code 74402	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT LINDSEY GRAHAM		Transaction ID: SB23.37605 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 6
Mailing Address P.O. BOX 1155 PO BOX 1155		Amount of Each Disbursement this Period 2500.00
City SENECA State SC Zip Code 29679	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. COMMITTEE TO RE-ELECT LORETTA SANCHEZ		Transaction ID: SB23.37613 Date of Disbursement
Mailing Address 601 S GLENOAKS BLVD., #208		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
City BURBANK	State CA	Zip Code 91502
Purpose of Disbursement Refund of Contribution	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="-1000.00"/>
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 47		

Full Name (Last, First, Middle Initial) B. DAVE CAMP FOR CONGRESS 2006		Transaction ID: SB23.37638 Date of Disbursement
Mailing Address 5915 EASTMAN AVE. SUITE 100 5915 EASTMAN AVE. SUITE 100		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City MIDLAND	State MI	Zip Code 48640
Purpose of Disbursement Contribution	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 04		

Full Name (Last, First, Middle Initial) C. DEMINT FOR SENATE COMMITTEE INC		Transaction ID: SB23.37607 Date of Disbursement
Mailing Address 701 GERVAIS STREET SUITE 150-178		<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2006"/>
City COLUMBIA	State SC	Zip Code 29201
Purpose of Disbursement Contribution	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC District: 00		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. DUNCAN FOR CONGRESS		Transaction ID: SB23.37663 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO BOX 2646		Amount of Each Disbursement this Period 1000.00
City KNOXVILLE State TN Zip Code 37901	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. FRELINGHUYSEN FOR CONGRESS		Transaction ID: SB23.37662 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 19 CATTANO AVENUE		Amount of Each Disbursement this Period 1000.00
City MORRISTOWN State NJ Zip Code 07960	Purpose of Disbursement contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 11	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. FRIENDS FOR JIM MCDERMOTT		Transaction ID: SB23.37637 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 6
Mailing Address PO BOX 21786		Amount of Each Disbursement this Period 1000.00
City SEATTLE State WA Zip Code 98111	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. FRIENDS OF CLIFF STEARNS		Transaction ID: SB23.37636 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO BOX 308		Amount of Each Disbursement this Period 1000.00
City SILVER SPRINGS State FL Zip Code 34489	Purpose of Disbursement Contribution Candidate Name Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 06	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FRIENDS OF JIM OBERSTAR		Transaction ID: SB23.37635 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO BOX 465		Amount of Each Disbursement this Period 1000.00
City DULUTH State MN Zip Code 55802	Purpose of Disbursement Contribution Candidate Name Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FRIENDS OF JIM OBERSTAR		Transaction ID: SB23.37661 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO BOX 465		Amount of Each Disbursement this Period 1000.00
City DULUTH State MN Zip Code 55802	Purpose of Disbursement Contribution Candidate Name Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. FRIENDS OF ROSA DELAURO		Transaction ID: SB23.37633	
Mailing Address 49 HUNTINGTON STREET		Date of Disbursement MM / DD / YYYY 04 / 20 / 2006	
City NEW HAVEN	State CT	Zip Code 06511	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT	District: 03		

Full Name (Last, First, Middle Initial) B. GALLEGLY FOR CONGRESS		Transaction ID: SB23.37660	
Mailing Address PO BOX 940001		Date of Disbursement MM / DD / YYYY 04 / 27 / 2006	
City SIMI VALLEY	State CA	Zip Code 93094	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA	District: 24		

Full Name (Last, First, Middle Initial) C. GUTKNECHT FOR CONGRESS COMM		Transaction ID: SB23.37628	
Mailing Address PO BOX 6428		Date of Disbursement MM / DD / YYYY 04 / 20 / 2006	
City ROCHESTER	State MN	Zip Code 55903	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MN	District: 01		

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. JD HAYWORTH FOR CONGRESS		Transaction ID: SB23.37659 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 14300 N. Northsight Blvd. #105		Amount of Each Disbursement this Period 1000.00
City State Zip Code Scottsdale AZ 85260	Purpose of Disbursement Contribution	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JIM GERLACH FOR CONGRESS COMMITTEE		Transaction ID: SB23.37629 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO Box 87		Amount of Each Disbursement this Period 1000.00
City State Zip Code Uwchland PA 19480	Purpose of Disbursement Contribution	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KILPATRICK FOR UNITED STATES CONGRESS		Transaction ID: SB23.37614 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address PO BOX 32175		Amount of Each Disbursement this Period -1000.00
City State Zip Code DETROIT MI 48232	Purpose of Disbursement Refund of Contribution	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 13	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. LATOURETTE FOR CONGRESS COMMITTEE		Transaction ID: SB23.37658 Date of Disbursement
Mailing Address 320 KENARDEN DR		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
City HIGHLAND HTS	State OH	Zip Code 44143
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 19		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) B. LEWIS FOR CONGRESS COMMITTEE		Transaction ID: SB23.37627 Date of Disbursement
Mailing Address PO BOX 247		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City REDLANDS	State CA	Zip Code 92373
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 41		
		Amount of Each Disbursement this Period <input type="text" value="3000.00"/>

Full Name (Last, First, Middle Initial) C. LINDER FOR CONGRESS		Transaction ID: SB23.37626 Date of Disbursement
Mailing Address PO BOX 942060		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2006"/>
City ATLANTA	State GA	Zip Code 31141
Purpose of Disbursement Contribution	<input type="text"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 11		
		Amount of Each Disbursement this Period <input type="text" value="2000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. MATHESON FOR CONGRESS		Transaction ID: SB23.37657 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 677 SOUTH 200 WEST SUITE A		Amount of Each Disbursement this Period 1000.00
City SALT LAKE CITY State UT Zip Code 84101		
Purpose of Disbursement Contribution Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2006 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: UT District: 02		

Full Name (Last, First, Middle Initial) B. MCNULTY FOR CONGRESS COMMITTEE		Transaction ID: SB23.37625 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 1560		Amount of Each Disbursement this Period 1000.00
City Green Island State NY Zip Code 12183		
Purpose of Disbursement Contribution Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2006 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: NY District: 21		

Full Name (Last, First, Middle Initial) C. MICHAUD FOR CONGRESS		Transaction ID: SB23.37656 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 6
Mailing Address PO Box 1119 11 Bangor Mall Blvd. Suite D		Amount of Each Disbursement this Period 1000.00
City Lewiston State ME Zip Code 04243		
Purpose of Disbursement Contribution Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House Disbursement For: 2006 <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼ State: ME District: 02		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. NADLER FOR CONGRESS INC		Transaction ID: SB23.37615 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 6
Mailing Address 18 EAST 16TH STREET SUITE 401		Amount of Each Disbursement this Period -1000.00
City NEW YORK State NY Zip Code 10013	Purpose of Disbursement Refund of Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. NADLER FOR CONGRESS INC		Transaction ID: SB23.37655 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 18 EAST 16TH STREET SUITE 401		Amount of Each Disbursement this Period 1000.00
City NEW YORK State NY Zip Code 10013	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PASTOR FOR ARIZONA		Transaction ID: SB23.37653 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO BOX 6554		Amount of Each Disbursement this Period 500.00
City PHOENIX State AZ Zip Code 85005	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. PASTOR FOR ARIZONA		Transaction ID: SB23.37654
Mailing Address PO BOX 6554		Date of Disbursement 04 / 27 / 2006
City PHOENIX	State AZ	Zip Code 85005
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 02		

Full Name (Last, First, Middle Initial) B. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN		Transaction ID: SB23.37652
Mailing Address PO BOX 3662		Date of Disbursement 04 / 27 / 2006
City SEATTLE	State WA	Zip Code 98199
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA District: 00		

Full Name (Last, First, Middle Initial) C. RICHARD E NEAL FOR CONGRESS COMMITTEE		Transaction ID: SB23.37623
Mailing Address 76 MAGNOLIA TERRACE		Date of Disbursement 04 / 20 / 2006
City SPRINGFIELD	State MA	Zip Code 01108
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA District: 02		

SUBTOTAL of Disbursements This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. SALAZAR FOR SENATE		Transaction ID: SB23.37650 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address PO BOX 600		Amount of Each Disbursement this Period 1000.00
City DENVER State CO Zip Code 80201	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. STABENOW FOR CONGRESS		Transaction ID: SB23.37622 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO BOX 4945		Amount of Each Disbursement this Period 1000.00
City E LANSING State MI Zip Code 48826	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. STEPHANIE TUBBS JONES FOR US CONGRESS		Transaction ID: SB23.37621 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address 3729 SILSBY RD		Amount of Each Disbursement this Period 1000.00
City UNIVERSITY HEIGHTS State OH Zip Code 44118	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. TIAHRT FOR CONGRESS		Transaction ID: SB23.37620 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address 2250 N Rock Rd #118 A		Amount of Each Disbursement this Period 1000.00
City State Zip Code Wichita KS 67226	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. TODD AKIN FOR CONGRESS		Transaction ID: SB23.37619 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address PO BOX 31222		Amount of Each Disbursement this Period 1000.00
City State Zip Code ST LOUIS MO 63131	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. TOM ALLEN FOR CONGRESS		Transaction ID: SB23.37618 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 6
Mailing Address P.O. BOX 17766		Amount of Each Disbursement this Period 1000.00
City State Zip Code PORTLAND ME 04112	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 01	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. TOM DAVIS FOR CONGRESS		Transaction ID: SB23.37608 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 6	
Mailing Address 6429 DOWNING COURT		Amount of Each Disbursement this Period 1000.00	
City ANNANDALE State VA Zip Code 22003	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. VIRGINIA FOXX FOR CONGRESS		Transaction ID: SB23.37609 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 6	
Mailing Address P.O. Box 1100		Amount of Each Disbursement this Period 1000.00	
City Clemmons State NC Zip Code 27012	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. VISCLOSKY FOR CONGRESS COMMITTEE		Transaction ID: SB23.37649 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6	
Mailing Address P O BOX 10003		Amount of Each Disbursement this Period 2500.00	
City MERRILLVILLE State IN Zip Code 46411	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial)

A. WAYNE ALLARD FOR UNITED STATES SENATE COMMITTEE

Mailing Address PO BOX 32

City LOVELAND State CO Zip Code 80539

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CO District: 00

Transaction ID: SB23.37617

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) A. Federal Express		Transaction ID: SB29.37721 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 1140		Amount of Each Disbursement this Period 75.26
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement Delivery Service Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Finance Committee of the Philadelphia Democratic County Executive Committee		Transaction ID: SB29.37645 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 22480		Amount of Each Disbursement this Period 2500.00
City Philadelphia State PA Zip Code 19110	Purpose of Disbursement VIP Cocktail Reception Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. NGL Group LLC		Transaction ID: SB29.37648 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 6
Mailing Address 112 Merrick Raod		Amount of Each Disbursement this Period 253.00
City Lynbrook State NY Zip Code 11563	Purpose of Disbursement Insurance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2828.26
TOTAL This Period (last page this line number only) ▶	2828.26